DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814

April 24, 1991

ALL-COUNTY LETTER NO. 91-35

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: REFUGEE PROGRAM REPORT OF TIME-EXPIRED CASES AND

PERSONS (RS 22 A)

REFERENCE: ALL-COUNTY LETTERS 85-37 AND 89-107, DATED MARCH 28.

1985 and DECEMBER 28, 1989

The purpose of this letter is to update the form and instructions for the Refugee Program Report of Time-Expired Cases and Persons (RS 22A), as well as to inform Counties of a change in the name of the form, all of which become effective on May 1, 1991.

The instructions have been revised to reflect the current definition of AFDC time-expired refugees (those refugees who have been in the United States for more than four months). Additionally, since refugees no longer need to be identified as time-eligible or time-expired under ${\rm GA/GR}$, the instructions for the RS 22A have been revised to require that all refugee ${\rm GA/GR}$ cases and persons be reported on this document. Lastly, the name of the form has also been changed to the Refugee Program Report of Time-Expired Refugee Cases and Persons (RS 22A).

The enclosed copy may be duplicated or a camera-ready copy may be ordered by calling the State Forms Management office at (916) 322-8738 until a supply becomes available through the warehouse. Stock orders for this form should be submitted to the Department of Social Services Warehouse on the County Forms Order, GEN 727B, according to normal procedures.

If you have any questions concerning these reporting requirements, please contact Valerie Maulet at (916) 323-5087.

DENNIS Y. BOYLE Deputy Director

Enclosure

cc: CWDA



REFUGEE PROGRAM REPORT

TIME-EXPIRED CASES AND PERSONS and GA/GR REFUGEE CASES AND PERSONS

SEN. JNE COPY TO:

Department of Social Services
Statistical Services Bureau
744 P Street M.S. 19-81
Sacramento, CA 95814

	County Submitting Report		1
	Month Ending		2
PART A — Cash Assistance		CASES	PERSONS
1. AFDC (time-expired)		5	8
a. Family Group		7	8
b. Unemployed		9	10
c. Foster Care		11	12
2. GENERAL ASSISTANCE/GENERAL RELIEF		.,	
PART B — Medical Assistance (time-expired)			PERSONS
1. MEDICALLY INDIGENT ADULTS		······	13
2. MEDI-CAL ONLY			14
COMMENTS			
Person to Contact Regarding this Form	Telephone No.	15 Date	16
	()		

REFUGEE

REPORTING INSTRUCTIONS — FORM RS 22*)GRAM REPORT — TIME-EXPIRED CASES and GA/GR REFUGEE CASES AND PERSONS

) PERSONS

CONTENT:

This monthly report provides for the statistical reporting of time-expired refugee cases and persons that received an AFDC cash grant and all refugee cases and persons that received a GA/GR cash grant during the report month. This report also provides for the statistical reporting of time-expired refugees who received any form of public medical assistance during the report month.

PURPOSE:

The purpose of this date is: 1) to provide county, state and federal administrators with information that may assist in budgeting, staffing, program planning and other administrative responsibilities; and, 2) to provide refugee data for a Legislative requirement mandated by the Budget Act of 1984, Section 9.00, Budget Item 5180-001-001. Paragraph 4.

DISTRIBUTION:

Data from the RS 22A reports will be compiled into monthly summaries for use by departmental managers, the State Legislature, and other interested agencies and individuals.

DUE DATE:

Reports are due in Sacramento no later than the 15th calendar day of the month following the report month. If the due date falls on a Saturday, Sunday or holiday, the due date will be the following work day. Send the completed report to:

Department of Social Services Statistical Services Bureau 744 P Street, Mail Station 19-81 Sacramento, California 95814

If the report will be delayed or incomplete, please contact Statistical Services at (916) 322-2230 or ATSS 492-2230

DEFINITIONS:

Case:

A case is defined as a cash assistance case that contains at least one time-expired refugee.

Time-Expired Refugee:

Refugees who have resided in the United States for more than 4 months from the date of entry into the United States. A refugee is any person who has been granted refugee status by the Federal Government as indicated by Form 1-94 or an individual from any country who is now a permanent resident alien as indicated by Form 1-151 or 1-551, and can document previous refugee status established by the Immigration and Naturalization Service. Reference: All County Letters 83-32 and 84-119.

INSTRUCTIONS:

Part A - Cash Assistance.

- 1. AFDC Enter separate column totals for the sum of items 1a. through 1c. If separate subtotals for items 1a. through 1c. are not available, enter "NA" in the appropriate cells and report the total only.
- 1a. Family Group Enter in the appropriate columns the number of time-expired refugee cases and persons that received cash assistance from the AFDC-FG program during the report month.
- 1b. Unemployed Enter in the appropriate columns the number of time-expired refugee cases and persons that received cash assistance from the AFDC-U program during the report month.
- 1c. Foster Care Enter the number of AFDC Foster Care children (the case count should equal the person count) who became foster children after the refugee relative or caretaker became time-expired. Do not report children who are already reported as Unaccompanied Minors or as Foster Care children in the Refugee Resettlement Program Cash Grant Caseload Movement Report (RS 237)
- 2. General Assistance/General Relief Enter in the appropriate columns the number of <u>all</u> refugee cases and persons that received county-only General Assistance/General Relief during the report month.

Part B — Medical Assistance (time-expired)

- Medically Indigent Adults Enter the number of time-expired refugee persons who received county sponsored medical services
 during the report month. Do not report incidences of service or individuals who received services from the Medi-Cal Only program
 reported on Line 2, below. Enter "NA" if the information is not available and explain (by footnote) the reasons for this reporting
 status.
- 2. Medi-Cal Only Enter the number of time-expired refugee persons who received Medi-Cal only during the report month. Do not report incidences of service or individuals who received services from a local public medical program as reported on Line 1, above. Enter "NA" if the information is not available.